

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843870

Entity Name: DEARBORN LIFE INSURANCE COMPANY**Current Principal Place of Business:**300 EAST RANDOLPH STREET
CHICAGO, IL 60601-5099**Current Mailing Address:**701 EAST 22ND STREET
LOMBARD, IL 60148 US**FEI Number:** 36-2598882**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LYNETTE COLEMAN C/O CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** LYNETTE COLEMAN

04/08/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT & CEO & DIRECTOR
Name WITWER, MICHAEL W
Address 701 EAST 22ND STREET
City-State-Zip: LOMBARD IL 60148

Title CORPORATE SECRETARY
Name KOSKY, JOHN
Address 701 EAST 22ND STREET
City-State-Zip: LOMBARD IL 60148

Title DIRECTOR
Name WALSH, JAMES
Address 300 E. RANDOLPH STREET
City-State-Zip: CHICAGO IL 60601

Title CHAIRMAN, DIRECTOR
Name PRASAD, ARUN
Address 300 EAST RANDOLPH STREET
City-State-Zip: CHICAGO IL 60601

Title TREASURER, VICE PRESIDENT
FINANCE
Name BURKE, CLAIRE C
Address 701 EAST 22ND STREET, SUITE 300
City-State-Zip: LOMBARD IL 60148

Title DIRECTOR
Name MCCANN, JAMES F
Address 701 EAST 22ND STREET
City-State-Zip: LOMBARD IL 60148

Title DIRECTOR
Name MANIKA, TURNBULL
Address 300 EAST RANDOLPH
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR
Name BRECKER, NICHOLAS
Address 2520 BRICKFIELD CT
City-State-Zip: THOUSAND OAKS CA 91362-5143

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN SEYBERT**ASSISTANT SECRETARY - 04/08/2025
MANAGING COUNSEL**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SNELL, BRIAN
Address 300 EAST RANDOLPH ST.
City-State-Zip: CHICAGO IL 60601

Title ASST. SECRETARY
Name SEYBERT, JOHN
Address 701 EAST 22ND STREET
City-State-Zip: LOMBARD IL 60148

Title DIRECTOR
Name TIKKANEN, JEFFREY
Address 300 EAST RANDOLPH ST.
City-State-Zip: CHICAGO IL 60601